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Testimony: California Performance Review Commission

Friday, August 20, 2004

10:00 a.m. to 4:00 p.m.

Price Center, Ballroom AB

UC San Diego

9500 Gilman Drive

La Jolla, California

Presented by: Nancy Dolton, Chair

Jorge Lambrinos, Vice Chair

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Members of the Commission:

The California Performance Review addresses several key issues for aging and adults with disabilities in California: what we want to address today is the proposed structural organization of the 'Department of Health and Human Services'. We commend the efforts to improve the current fragmented system of programs and services for aging in California from both an administrative and consumer perspective. Seldom is state leadership willing to entertain such big picture reform and commit to see the process through to solutions – we welcome the opportunity to participate in this challenging discussion.

A key and major component of any restructuring in the State of California has to include the impact of an aging society. Specifically, the increasing numbers of older adults and specifically minority older persons will affect the provision of services and programs statewide. Older persons in this nation are no longer a special needs target group but have become a major part of mainstream society. Similarly in California, older persons are impacting services and programs across the state infrastructure well beyond those provided by the Department on Aging. The social, economic and political ramifications are tremendous. These dramatic demographic changes will require diligent coordination of programs and services and active participation of expert advisors selected from the community-at-large to insure efficient and effective delivery of services.

We feel it is essential that a successful state administrative structure for aging programs and services include a **strong focal point for aging** at the state level that has the **independence and the authority** to perform the following functions outlined in the Older American's and Older Californian's Act:

- Fulfill role of **Spokesperson/Advisor** for Aging Policy to the Legislature, Governor, and HHSAⁱ
- **Determine constituent input** and provide a voice for senior concerns^{ii,iii,i}.
- **Advocate** on behalf of the 4 million seniors in CA^{iv,i} (yes, not only can this happen in a state administrative structure, it is *required* in the Older American's and Older Californian's Act).

- **Plan and design a service delivery system** that meets the challenge of California's changing demographics – ie **aging of the baby boomers**^{v,iii}.
- **Coordinate services across state departments and agencies** (ie. housing, transportation, etc.) that impact on older adults and individuals with disabilities^{vi,i}, building on what has already been done to streamline the services to these populations.
- Ensure greatest, most **efficient**/effective/customer-friendly **use of state resources**, enhancing service delivery and access to services taking into account cultural and language considerations^{vii}.
- **Preserve the dignity** and integrity of older persons^{viii}.

Currently, the California Commission on Aging fulfils the role of advocate on behalf of CA's seniors, obtains consumer input, convenes state leadership to coordinate programs and services, and is the monitoring agent for the state's plan for the aging boomers (SB 910 Strategic Plan for an Aging California – Preparing for the Aging Boomers). The California Commission on Aging receives only federal funds to perform these functions. We would like the Commission to consider where these unique and vital functions for aging that we just described might be in the new structure proposed in the CPR. Although the state's programmatic functions related to the Older American's Act dollars can be identified under a Center for Social Services in the new Department of Health and Human Services, it is unclear where the larger coordination, advocacy and service system design function/responsibility might rest and where the voice of the consumer could be heard (the report states that the new Department of Health and Human Services

could more efficiently handle these functions, but then later in chart form claims that these same functions would be abolished)^{ix,x}.

We are prepared and excited to work together in the months to come on a structure that includes the key components outlined above. Public input into the reorganization process from the aging and adults with disabilities networks is the key to effective, consumer – focused reorganization. The Older American's Act and the Older Californian's Act provide clear guidance to the products of any state structure for aging. There are a variety of restructuring efforts underway that offer exciting ideas that should be considered in the final decision on the best structure for Californian's seniors and adults with disabilities such as Assembly Member Daucher's AB 784, Assembly Member Berg's Master Plan for Aging, the SB 910 Strategic Plan for an Aging California – Preparing for the Aging Boomers, the Little Hoover Commission Report "Real Lives, Real Reforms, Improving Health and Human Services," and Assembly Member Daucher's Select Committee on Olmstead Implementation. Thank you for your time and the opportunity to speak to you today on behalf of the California Commission on Aging.

ⁱ CA W&I Code 9202(a); CA W&I Code 9202(f)

ⁱⁱ 42USC3027(a)(4)

ⁱⁱⁱ CA W&I Code 9202(d)

^{iv} 42USC3025(a)(1)(D);42USC3025(a)(2)(G)(ii)

^v 42USC3025(A)(1)(C)

^{vi} 42USC3025(a)(1)(D);42USC3027(a)(17);42USC3027(a)(18); 42USC3027(a)(23); 42USC3027(a)(24)

^{vii} 42USC3021(a)(1)

^{viii} 42USC3021(a)(1)(A)

^{ix} California Performance Review, Volume II: 'Form Follows Function,' Appendix entitled 'Evaluating California's Boards and Commissions.'

^x California Performance Review, Volume II: 'Form Follows Function,' Appendix entitled 'Impact on Current Agency Index.'